

CASE MANAGEMENT:
A Guide for Screening Programs

**Texas Department of Health
Bureau of Women's Health
Breast and Cervical Cancer Control Program
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Breast and Cervical Cancer Control Program
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I. Statement of Need

A systematic approach of assessment, planning, and monitoring is necessary in order to overcome client and system barriers to timely diagnosis and treatment.

II. Goals of Case Management

The goal of case management for the BCCCP is to ensure that women enrolled in the program receive timely and appropriate services. Assessment of BCCCP-enrolled women for case management services and the provision of such services when necessary can assist in attaining this goal. The outcome of case management and the progress toward reaching this goal is evaluated by the performance measures outlined in the BCCCP contract and manual of operations. Performance measures include:

- a shortened interval between screening, diagnosis and treatment;
- a reduction in the number of clients lost to follow-up or refusing further services; and
- the initiation of treatment within 30 days of the diagnosis of a pre-cancerous or cancerous condition.

III. Definition of Case Management

Case management is an individualized approach for each BCCCP enrolled woman with abnormal screening and/or diagnostic results which involves establishing, brokering, and sustaining a system of available clinical and essential support services.

IV. Case Management Components

Key elements of the case management components both at the program and client level include assessment, planning, coordination, monitoring, evaluation, and resource development. The elements outlined in this standard may not include all possible functions of case management, but are the minimum elements to be incorporated into the BCCCP case management activities.

Case management begins with receipt of an abnormal screening result. The client must be informed and understand the screening and follow-up process. The case manager and client must discuss how diagnostic services will be arranged. Case management services conclude when a client initiates treatment or is no longer eligible for BCCCP services.

Case managers are responsible for identifying and securing resources for cancer treatment services for BCCCP-enrolled women in need, regardless of their ability to

pay. In Texas, the Breast and Cervical Cancer Prevention and Treatment Act was implemented to provide full Medicaid benefits to uninsured women under age 65 who are diagnosed with cancer through the BCCCP and require treatment for breast or cervical cancer.

A. Assessment

Assessment is a cooperative effort between the client and case manager to examine and document the client's need for services (screening, diagnostic, treatment, and essential support services) through a process of gathering critical information from the client. The assessment includes consent and assurance of confidentiality between the client, the case manager, and the contractor.

All clients with abnormal screening results must receive a comprehensive needs assessment, using the Comprehensive Case Management Form (CCMF) or documenting in the client's progress notes, unless the client refuses. Assessment components include client information, including other contact information, social resources, other services the client has accessed, education and counseling issues, consent for case management and confidentiality. The assessment is to be conducted within 30 days from the date of referral for diagnostic procedures or prior to the initiation of the first diagnostic service. The assessment should be conducted in a face-to-face interview format.

B. Planning

Planning is a cooperative effort between the client and case manager to develop an individual service plan to meet the client's immediate, short-term and long-term needs as identified in the assessment.

The service plan must be documented on the CCMF or the client's progress notes and completed within 30 days of referral for diagnostic procedures and case management. The plan includes needs, services related to needs, timeframes for meeting the services, referral, outcome and follow-up. Timeframes must be consistent with BCCCP's required intervals.

C. Coordination

Coordination is the implementation of the service plan, and the linkage between the client and contractors, including the appropriate use of available resources to meet the needs of the client.

Implementation of planned services and ongoing case manager-client consultation is documented in the CCMF or the client's progress notes. Coordination of services may include scheduling appointments, making referrals, and obtaining and disseminating appropriate reports.

D. Monitoring

Monitoring is the ongoing assessment of the client's service plan to ensure that the client's needs are met. Monitoring is key to ensuring attainment of required performance measures.

Documentation: As additional needs are identified, they are recorded on the CCMF or the client's progress notes. The case manager must document that the diagnostic, treatment, or social service which was provided took place within 30 days of the planned service date.

E. Resource Development

Resource development happens concurrently at the program and client levels.

- At the program level – Resource development is the establishment of formal and informal agreements to maximize availability and access to essential screening, support, diagnostic and treatment services.
- At the client level – Case managers assure that clients gain the knowledge, skills and support needed to obtain necessary services.
- At the program level – Documentation is reflected in match reports, funding applications, and in any written formal or informal agreements. Documentation may also be reflected in a resource directory developed specifically for detailing services that support BCCCP-enrolled women with unmet needs.
- At the client level – Documentation is reflected in the CCMF or the client's progress notes.

F. Evaluation

Definition: The process of assessing the effectiveness of case management at the client, contractor and state levels.

Documentation:

- At the client level – client satisfaction surveys;
- At the state level – internal quality assurance reviews;
- At the state level – client data for case management performance measures.